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REQUEST FOR PATENT FEE REFUND

1 Date of Request: 9/20/03

2 Serial/Patent # 09/665112

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
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7 TOTAL AMOUNT OF REFUND

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8 TO BE REFUNDED BY:

Treasury Check

Credit Deposit A/C #:

9 - 2201

10 REASON:

Overpayment

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No Fee Due (Explanation):

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TYPED/PRINTED NAME: R.C. STAVIS

TITLE: ATTY

SIGNATURE: R.C. STAVIS

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APPROVED: Alice Kelly

DATE: 9/23/03

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Request for Extension of Time (2 Sheets, Text)
2 Original Copies of Extension Request (4 Sheets, Text)
Declaration (13 Sheets, Text)
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FROM: K. Vander Sande Desk Phone: 973-724-3449

SUBJECT: DOCKET NO. 1995-18-A2, Response to Office Action, SN: 09/665190,
Filed 09/12/2000, FOR: HIGH ENERGY THERMOPLASTIC ELASTOMER
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